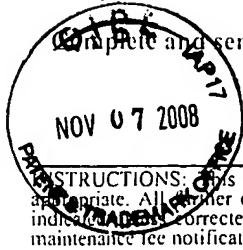


PART B - FEE(S) TRANSMITTAL



Complete and send this form, together with applicable fee(s), to: Mail

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Commissioner for Patents
P.O. Box 1450
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or Fax (571)-273-2885

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22929

7590

09/09/2008

SHAPER ILER LLP
1800 WEST LOOP SOUTH
SUITE 1450
HOUSTON, TX 77027

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Jay T. Iler	(Depositor name)
<i>[Signature]</i>	(Signature)
Nov. 7, 2008	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/677.900	10/02/2003	Dennis W. Crabtree	50049	9672

TITLE OF INVENTION: RANGER/HYBRID AUTOMATIC SELF-METERING NOZZLE, WITH RATIO-SELECTABLE & FLOW METER FEATURES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$720	\$300	\$0	\$1020	12/09/2008
EXAMINER	ART UNIT	CLASS-SUBCLASS	11/12/2008 NGUYENJ 00000001 501753 10677900			
NGUYEN, DINH Q	3752	169-044000	01 FC:1504	380.00 OP		
			02 FC:0001	24.00 OP		
			03 FC:2501	720.00 OP		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 SHAPER ILER LLP
2 Sue Z. Shaper
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

Williams Fire & Hazard Control, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Mauriceville, TX

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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☐ Publication Fee (No small entity discount permitted)

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☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-1753 (enclose an extra copy of this form)

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☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

[Signature]

Date

11/17/08

Typed or printed name

Sue Z. Shaper

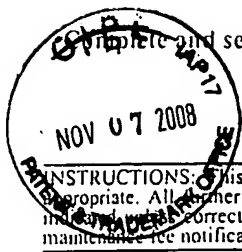
Registration No.

316063

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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/677,900 10/02/2003 Dennis W. Crabtree 50049 9672

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nonprovisional YES \$720 \$300 \$0 \$1020 12/09/2008

EXAMINER	ART UNIT	CLASS-SUBCLASS
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NGUYEN, DINH Q 3752 169-044000

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Authorized Signature

Date

Typed or printed name

Registration No.

Sue Z. Shaper

31603

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